



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Reynoldsburg Education Association				
Full Name of Contributor Annette Hawley			Registration Number, if PAC	
Street Address 13163 Coventry Ave.		Employer/Occupation/Labor Organization* Teacher		Form (Cash, Check, etc.) check
City Pickerington	State OH	Zip Code 43147	Date (MM/DD/YYYY) 08/25/2017	Amount \$10.00
Full Name of Contributor Tonya Pryor			Registration Number, if PAC	
Street Address 540 Tall Oaks Dr.		Employer/Occupation/Labor Organization* Teacher		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43230	Date (MM/DD/YYYY) 08/25/2017	Amount \$25.00
Full Name of Contributor Vernita Johnson			Registration Number, if PAC	
Street Address 2551 Bulen Ave.		Employer/Occupation/Labor Organization* Teacher		Form (Cash, Check, etc.) cash
City Columbus	State OH	Zip Code 43207	Date (MM/DD/YYYY) 11/01/2017	Amount \$10.00
Full Name of Contributor Mandy Smith			Registration Number, if PAC	
Street Address 22 Peach Blossom SW		Employer/Occupation/Labor Organization* Teacher		Form (Cash, Check, etc.) cash
City Pataskala	State OH	Zip Code 43062	Date (MM/DD/YYYY) 11/01/2017	Amount \$20.00
Full Name of Contributor Ohio Education Association			Registration Number, if PAC	
Street Address 225 East Broad St		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43216	Date (MM/DD/YYYY) 10/24/2017	Amount \$860.01

*Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

Page Total \$925.01